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FIRANSMITTAL FIling Date First Named Inventor Meir S. Sacks Art Unit (to be used to all correspondence after initial filing) Examiner Name Gollamudi S. Kishore Attorney Docket Number ENCLOSURES (Check all that apply)	fter Allowance Communication to TC				
FIRST Named Inventor Meir S. Sacks Art Unit 1615 Examiner Name Gollamudi S. Kishore Attorney Docket Number 286262-00005 ENCLOSURES (Check all that apply)	fter Allowance Communication to TC				
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Fee Transmittal Form ☐ Drawing(s)	opeal Communication to Board				
Fee Attached LJ Licensing-related Papers o	Appeals and Interferences				
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Petition Petition Petition Petition Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer	ppeal Communication to TC ppeal Notice, Brief, Reply Brief) reprietary Information tatus Letter ther Enclosure(s) (please Identify elow): postcard				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGEN	Т				
Firm Name Pietragallo, Bosick & Gordon					
Signature Chu Al Coll of					
Printed name Alan G. Towner					
Date June 28, 2005 Reg. No. 32,949	eg. No. 32,949				
CERTIFICATE OF TRANSMISSION/MAILING					
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:					
Signature Was House					
	ate June 28, 2005				

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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erwork Reduction Act of 1995, no nersons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. uant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Application Number 09/653,794 TRANSMITTAI Filing Date September 1, 2000 For FY 2005 First Named Inventor Meir S. Sacks **Examiner Name** Gollamudi S. Kishore Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1615 **TOTAL AMOUNT OF PAYMENT** 475.00 286262-00005 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): ✓ Deposit Account Deposit Account Number: <u>500859</u> Deposit Account Name: Pietragallo For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity Small Entity** Small Entity **Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 50 130 65 Plant 200 100 300 160 80 150 Reissue 300 600 150 500 250 300 200 Provisional 100 0 0 0 0 2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims Multiple Dependent Claims** Fee Paid (\$) Fee (\$) - 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Indep. Claims Fee (\$) Fee Paid (\$) - 3 or HP = HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer

SUBMITTED BY	\sim \sim	V		
Signature	(Clan &	Weer.	Registration No. (Attorney/Agent) 32,949	Telephone 412.263.4340
Name (Print/Type	Alan G. Towner			Date June 28, 2005

listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50

Number of each additional 50 or fraction thereof

(round up to a whole number)

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Other (e.g., late filing surcharge): Two-Month Extension of Time (\$225) + Appeal Brief (\$250)

Extra Sheets

Non-English Specification, \$130 fee (no small entity discount)

Total Sheets

4. OTHER FEE(S)

- 100 =

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.